

**REMARKS**

Claims 11 and 14-25 were pending in the present application. Claims 14-16 and 21-25 have been withdrawn from consideration. Claim 11 has been amended herein, support for which can be found throughout the specification. Upon entry of the present amendment, claims 11 and 17-20 will remain pending.

**I. The Claimed Invention Is Not Obvious**

Claims 11 and 17-20 are rejected under 35 U.S.C. §103(a) as allegedly being unpatentable over the combination of: 1) U.S. Patent Application Publication 2003-0187038 (hereinafter, the “Imura reference”); 2) Yoneyama et al., Jpn. J. Pharmacol., 2002, 89, 193-196 (hereinafter, the “Yoneyama reference”); 3) World Health Organization document cited at page 3 of the Office Action (hereinafter, the “WHO reference”); and 4) Ortlepp et al., Eur. J. Pharmacol., 2002, 436, 145-150 (hereinafter, the “Ortlepp reference”). Applicants traverse the rejection and respectfully request reconsideration because the combination of cited references fails to produce the claimed invention.

The combination of the cited references fails to produce Applicants’ claimed methods. Applicants submit that their reasons of record remain applicable. In addition, the Office’s use of the Imura reference is deficient. The Office asserts that the Imura reference teaches that candesartan cilexetil is “useful as prophylactic or therapeutic agents for fibrinogen-related diseases of mammals, which includes metabolic disorders, such as Syndrome X (paragraph 0156)...” (see, Office Action at page 3). Enclosed, however, is a Declaration under 37 CFR § 1.132 in which Anders Ljunggren, a co-inventor of the present application, states that he is unaware of any causative link between fibrinogen levels in a human and syndrome X or metabolic syndrome in a human (see, paragraph 8) and that the Imura reference fails to provide any data (see, paragraph 6) or citation (see, paragraph 7) to support the position that syndrome X is a fibrinogen-related disease. Thus, the bare and unsupported statement in the Imura reference cannot be relied upon by one skilled in the art. Accordingly, one skilled in the art would not rely upon the Imura reference as purported in the Office Action. The other cited references fail to cure this deficiency. Provided with these facts, a person skilled in the art would not draw any conclusions as to the usefulness of angiotensin II inhibitors for treating metabolic syndrome.

Therefore, the claimed invention is not obvious in view of the combination of cited references. Accordingly, Applicants respectfully request that the rejection under 35 U.S.C. §103(a) be withdrawn.

**II. Conclusion**

In view of the foregoing, Applicants respectfully submit that the claims are in condition for allowance. An early notice of the same is earnestly solicited. The Office is invited to contact Applicants' undersigned representative at 610.640.7859 if there are any questions regarding Applicants' claimed invention.

The Commissioner is hereby authorized to debit any underpayment of fee due or credit any overpayment to Deposit Account No. 50-0436.

Respectfully submitted,

/Paul K. Legaard, Reg.# 38534/

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Enclosure

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